## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000077329 (8)

R & B BEEPERS, INC. Principal Place of Business Mailing Address 817 S.W. 8TH STREET B17 S.W. 8TH STREET MIAMI FL 33130 MIAMI FL 33130 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/19/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0527457 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BLANCH, DAGOBERTO 12250 SW 39 ST Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33175** 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1 1 TITLE **BLANCH, DAGOBERTO** NAME 1.2 NAME 12250 S.W. 39TH STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-STOZIP CITY-ST-78P DELETE 2.1 TITLE Addition TITLE Blanch, Ivaida R. BLANCH, IRALDA R NAME 2.2 NAME 12250 SW 39 ST STREET ADORESS 23 STREET ADDRESS 33175 MIAMI FL CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-7IP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

Block 12 or Block 13 if changed of on an attachmon with an address

14. I hereby certify that the information supplied with this filing does not qualify indicated on this annual report or supplemental annual report is true and of officer or director of the corporation or the receiver or this lee employered to the corporation or the receiver or this lee.

CITY-ST-ZIP

1-26-98

for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information corrate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

305-858-7112

**FILED** 

Jan 30 1998 8:00am

Secretary of State